

ctitioner's Docket No. U 946765-7

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: J. Timothy GREENAMYRE, et al Serial No.: 09/148,973 Group No.: 1627

Filed: September 4, 1998 Examiner.: Maurice Garcia Baker

For: METHODS OF ADMINISTERING AN AMPA RECEPTOR ANTAGONIST TO TREAT

DYSKINESIAS ASSOCIATED WITH DOPAMINE AGONIST THERAPY

37 C.F.R. 1.116 **EXAMINING GROUP** 1627

RESPONSE UNDER EXPEDITED PROCEDURE

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#### CERTIFICATION UNDER 37 C.F.R. 1.8(a) and 1.10\*

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# AMENDMENT OR RESPONSE AFTER FINAL REJECTION—TRANSMITTAL

Transmitted herewith is an amendment after final rejection (37 C.F.R. 1.116) for this application.

NOTE: Response to Final Rejection—Avoiding Extension Fees "In patent applications wherein a three month Shortened Statutory Period (SSP) is set for response to a Final Rejection, the response would best be filed within two months of the date of the Office Action, If filed within two months, any Advisory Action mailed after the SSP expires will reset the SSP to expire on the date of the Advisory Action for extension fee purposes, but never more than six months from the date of the Final Rejection." Notice of Nov. 30, 1990 (1122 O.G. 571 to 591).

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2.	Applicant is								等宣则		
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	Ø	other t	han a small o	entity.		2			RECEIVEL JUL 2 8 2003 TECH CENTER 1600/290		
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NOTE:		Suppleme -35) state		t filed in resp	onse t	o a final office	action, the Notice of	(De	cember 10, 1985 (1061		
		filing ar of the si allowar	nd/or entry of a h hortened statuto ice. Of course, i sed to run."	Notice of Appe ory period unl f a Notice of A	eal or j less the ppeal	filing and/or el e timely-filed r has been filed	ntry of an additional description of an additional description of a contract of the shortened of the shorten	amei ippli	ne is required to permit ndment after expiration ication in condition for utory period, the period		
3.			(0	complete (a,	) or (	b), as appli	cable)				
	(a)	×					f time under 37 C total number of n		R. 1.136 ths checked below:		
		Extens	Extension		Fee for other than			Fe	Fee for		
		(months)		small entity				small entity			
		one m	onth		\$	110.00		\$	55.00		
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If addi	tional ex	ktension	of time is re	quired, ple	ase co	onsider this	a petition therefor	r.			
			(check a	nd complet	e the	next item, i	f applicable)				
		An extension for months has already been secured and the fee paid therefor continuous is deducted from the total fee due for the total months of extension no requested.									
			Extension	fee due wit	h this	s request	\$	_			

(Amendment or Response After Final Rejection—Transmittal—page 2 of 4) 9-20

(b)	Applicant believes that no extension of term is required. However, this condi-					
	tional petition is being made to provide for the possibility that applicant has					
	inadvertently overlooked the need for a petition and fee for extension of time.					
	ę:					

## FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

							OTHER THAN A		
	(Col.1)	١	(Col. 2)	(Col. 3)	SMALL ENTITY		SMALL ENTITY		
Claims Remaining After Amendment									
			Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	OR	Rate	Addit. Fee
Total	*	Minus	**	= ,	x \$ 9 =	\$		x \$18 =	\$
Indep.	*	Minus	***	=	x \$42 =	\$		x \$84 =	\$
☐ First	Presentation	on of Mult	iple Dependen	+ \$140 =	\$		+ \$280 =	\$	
			•		Total Addit. Fee	\$	OR	Total Addit. Fee	\$

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "O" in Col. 3,
- \*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- \*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

  The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

**WARNING:** See 37 C.F.R. § 1.116. (complete (c) or (d), as applicable) (c) No additional fee is required. OR (d) Total additional fee required is \$ **FEE PAYMENT** 5.  $\boxtimes$ Attached is a check in the sum of \$ 410 Charge Account No. \_\_\_\_\_ \_\_ the sum of \$ \_\_\_ A duplicate of this transmittal is attached.

### FEE DEFICIENCY

NOTE: Where there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the case. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).

## AND/OR

If any additional fee for claims is required, charge Account No. 12-0425

SIGNATURE OF PRACTITIONER

CLIFFORD I MASS

(type of print name of practitioner)

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